Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Department of the Treasury Internal Fravenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

A	For the	2009 calendar year, or tax year beginning and ending		
В	Check if applicable	lassins bare and sound: bartimore's camparyn ro	D Employer identific	ation number
	Addres Change	s label or our Children, Inc.		
	Name change	type Doing Business As	52-2	147148
	Initial return	See Number and street (or P O box if mail is not delivered to street address) Room/s	uite E Telephone number	
	Termir øted	Specific 2 East Read Street	(410	
	Ameno	City or town, state or country, and ZIP + 4	G Gross receipts \$	2,528,133.
	Applic	Edicimore, ND 21202	H(a) Is this a group re	
	pendir	F Name and address of principal officer: nd thaway release	for affiliates?	Yes X No
		1025 W. 43rd Street, Baltimore, MD 21211	H(b) Are all affiliates incl	
		mpt status: X 501(c) (3) ◀ (Insert no.) 4947(a)(1) or 527		list. (see instructions)
_		e: > www.SafeandSound.org	H(c) Group exemption	
			ear of formation 1998 M	State of legal domicile MD
u	art I	Summary Briefly describe the organization's mission or most significant activities: To help	the children	<u></u>
Activities & Governance	1	Baltimore.	che children d	
Ē	2	Check this box 🕨 🔛 if the organization discontinued its operations or disposed of n	nore than 25% of its net as	
Ž	3	Number of voting members of the governing body (Part VI, line 1a)	3	8
8	4	Number of independent voting members of the governing body (Part VI, line 1b)	. 4	8
jes	5	Total number of employees (Part V, line 2a)	5	. 18
	6	Total number of volunteers (estimate if necessary)	6	0.
4	/a	Total gross unrelated business revenue from Part-VIII, column (C), line 12	7a	0.
_	<u>p</u>	Net unrelated business taxable income from Form 990 T, line 34	7b Prior Year	Current Year
	۵	Contributions and grants (Part VIII, line 1h)	2,593,897.	2,525,687.
	0	Contributions and grants (Part VIII, line 1h) CCT & © 2010	2,030,03.1	2/323/33/1
	10	Investment income (Part VIII, column (A), lines 3,-4, and 7d)	22,290.	2,446.
\$ 6	11	Other revenue (Part VIII, column (A), lines 5, 6d,/8c,/9c, 10c, and 1/1e)		
m	12	Total revenue · add lines 3 through 11 (must equal Part VIII, column-(A), line 12)	2,616,187.	2,528,133.
AON GENENOS Sevenue	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	167,532.	559,604.
8	14	Benefits paid to or for members (Part IX, column (A), line 4)		
< y	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	999,023.	746,078.
ONOZ @ O A	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
(G) 2	b	Total fundraising expenses (Part IX, column (D), line 25)		
<u> </u>	17	Other expenses (Part IX. column (A), lines 11a-11d, 11f-24f)	1,000,911.	952,369.
\Box		Total expenses. Add lines 13·17 (must equal Part IX, column (A), line 25)	2,167,466.	2,258,051.
_	19	Revenue less expenses Subtract line 18 from line 12	448,721.	270,082.
Net Assets or	200	T. I	Beginning of Current Year 1,240,833.	End of Year 1,389,141.
SSe	을 20 21	Total assets (Part X, line 16)	162,849.	41,075.
Vet /	21	Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20	1,077,984.	1,348,066.
	art II	Signature Block	2707173011	1751070001
<u></u>		Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statement	ents, and to the best of my knowledg	e and belief, it is true correct,
		and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowled		0 0
	gn ere	Signature of officer Ferces	Date 10. (0.10
•••		▶ Hathaway Ferebee, Executive Director		
		Type or print name and title		
Pa	id	Preparer's Date	! coff I (see ins	r's identifying number tructions)
_	ia eparer's	signature 09/30/10	employed >	·
	e Only	Firm's name (or Show Company, LLC yours if	EIN ▶	
	···· y	self-employed), \$200 International Circle, Suite 550		410) 504 0060
		ZIP+4 Hunt Valley, MD 21030	Phone no P	- C
M	ay the l	RS discuss this return with the preparer shown above? (see instructions)	!AAl	X Yes No

Safe and Sound: Baltimore's Campaign for

Form 990 (2009) our Children, Inc.

Part IV Checklist of Required Schedules

1 14 the organization dissorbed in section 501 (c)(5) or 4947 (a)(11) (other than, a private foundation)? 1 17 18 19 19 19 19 19 19 19		·		Yes	No
2 X Did the organization required to complete Schedule 6, Schedule of Contributors? Did the organization engage in direct or indirect political campagn activities on behalf of or in opposition to candidates for public officer if "Yes," complete Schedule C, Part II Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II Section 501(c)(4), 501(c)(6); and 501(c)(6) organizations. Is the organization subject to the section 6033(c) notice and reporting requirement and proxy tax II "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts? II "Yes," complete Schedule D, Part I. Did the organization maintain any donor advised funds or any similar funds or accounts? II "Yes," complete Schedule D, Part I. Did the organization requirement and proxy tax II "Yes," complete Schedule D, Part I. Did the organization maintain collections of works of art, instorical treasures, or other similar assets? If "Yes," complete Schedule D, Part II. Did the organization insport an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit complete Schedule D, Part II. Did the organization freedry or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part IV. It is the organization sanswer to any of the following quoistions "Yes"? If so, complete Schedule D, Part XI, IV, VIII, IV, VIII, IV, VIII, IV, VIII, V	1	Iş the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Pes," complete Schedule C, Part II Section 501(c)(8), organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II Section 501(c)(8), and 501(c)(8), and 501(c)(8) organizations. Is the organization subject to the section 603(g) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide ordit courseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide ordit courseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV II is the organization report an amount for independent organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part VII. Did the organization report an amount for independent organization in Part X, line 10? If "Yes," complete Schedule D, Part VIII. Did the organization report an amount for other assets in Part X, line 10? If "Yes," complete Schedule D, Part X. Did the organization report an amount for other assets in Part X, line 10? If "Yes," complete Schedule D, Part X. Did the organization is beginned an amount for other assets in Part X, line 10? If "Yes," complete Schedule D, Part X. Did the organization subject of the assets in Part X, line 10? If "Yes," comp		If "Yes," complete Schedule A	_1_		<u> </u>
public office? If "Yes," complete Schedule C, Part II Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II Section 501(c)(4), 501(c)(3), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III Did the organization maintain any donor adversed funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Did the organization report on amount in Part X, line 21; serve as a custodian tor amounts not listed in Part X; complete Schedule D, Part IV Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part IV It is the organization server to any of the following questions "Yes"? If so, complete Schedule D, Part IV, Did the organization report an amount for investments in program related in Part X, line 10? If "Yes," complete Schedule D, Part IV. Did the organization report an amount for investments in program related in Part X, line 10? If "Yes," complete Schedule D, Part VII. Did the organization report an amount for investments in program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XII. Did the organization is paperate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X. Did the organization included in consolidated, independent audited financial statements for	2	is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 11 is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable • Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI. • Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII. • Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. • Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XIII. • Did the organization report an amount for other labilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X. • Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X. 12 Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes, "complete Schedule D, Part X X, IXII, and XIII. Is optional 13 Is the organization included in consolidated, independent audited financial statements for the tax year? If "Yes, "complete Schedule D, Part X X, IXII, and XIII is optional 14 Did the organization maintain an office, employees, or agents outs	8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		Ì	
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20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H	19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
The time original control of the con		complete Schedule G, Part III	19		
	20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H			

Form **990** (2009)

Form 990 (2009) our Children, Inc.

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Qid the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u>X</u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		<u>X</u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	ļ <u>.</u>	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	Ì		
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete	ļ		
	Schedule L, Part III	27	ļ	X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			۱
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	<u> </u>	X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?] <u></u>
	If "Yes," complete Schedule R, Part V, line 2	35	ļ	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			1,,
	If "Yes," complete Schedule R, Part V, line 2	36	├	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			,,
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	ļ	<u> X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		,,	
	Note. All Form 990 filers are required to complete Schedule O.	38	X	L
		Form	990 (2009)

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		163	110
	U.S. Information Returns. Enter -0- if not applicable			
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1		
	(gambling) winnings to prize winners?	10		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 18			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	ļ		
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		<u>X</u>
b	If "Yes," enter the name of the foreign country: ►			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			
	Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<u>X</u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			.,
_	any contributions that were not tax deductible?	6a		<u>X</u>
b	if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts		}	
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services			Х
_	provided to the payor?	7a 7b		
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7.0		
C	to file Form 8282?	7c		Х
А	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	1		
•	benefit contract?	7e	[]	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 1		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the			
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings			
	at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1		
11	Section 501(c)(12) organizations. Enter:			
-	Gross income from members or shareholders	İ		
þ	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)	1.		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	Form	990 (2000

52-2147148

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

<u>Sec</u>	tion A. Governing Body and Management				,	
		1 .	l	0	Yes	No
	Enter the number of voting members of the governing body	1a		8		
ь	Enter the number of voting members that are independent	1b		8		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other			v
_	officer, director, trustee, or key employee?		_	2_		<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the	e dire	ct supervision			v
	of officers, directors or trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its organizational documents since the prior Fo		J was filed?	4	X	
5	Did the organization become aware during the year of a material diversion of the organization's asset	(S7		5		Х
6	Does the organization have members or stockholders?	1		6_		
7a		ember	s of the	7-		Y
	governing body?			7a		X
_	Are any decisions of the governing body subject to approval by members, stockholders, or other per					Λ
8	Did the organization contemporaneously document the meetings held or written actions undertaken	auring	the year			,
_	by the following:				Х	
a	The governing body?			8a	Λ	Х
Þ	Each committee with authority to act on behalf of the governing body?	لممطم	-44-	<u>8b</u>		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea organization's mailing address? If "Yes," provide the names and addresses in Schedule O	icnea	at the	9		X
200	tion B. Policies (This Section B requests information about policies not required by the Internal R	01/00/	a Cada)			
ec.	tion B. Foncies (This Section B requests information about policies not required by the internal h	evenu	a Code.)		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?			10a	163	X
	If "Yes," does the organization have written policies and procedures governing the activities of such	chant	ere affiliatee	1.00		
U	and branches to ensure their operations are consistent with those of the organization?	Chapt	crs, armates,	10ь		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before fi	lina th	e form?	11	Х	
 11A		g	0 1011111	,		
	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х	
	Are officers, directors or trustees, and key employees required to disclose annually interests that coi	ıld aıv	e rise	122		
_	to conflicts?	.		12b	Х	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes,"	describe			
	In Schedule O how this is done	•		12c	X	
13	Does the organization have a written whistleblower policy?			13	X	
14	Does the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review and approve	al by ı	ndependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		·			
а	The organization's CEO, Executive Director, or top management official			15a	Х	
b	Other officers or key employees of the organization			15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)				" "	. ,
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	vith a			
	taxable entity during the year?			16a	<u></u>	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva	luate	ts participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org	anızat	on's			
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ▶MD					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	Г (501	c)(3)s only) availa	able for		
	public inspection. Indicate how you make these available. Check all that apply.					
	Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or	onflic	of interest policy	y, and fina	incial	
	statements available to the public.					
20	State the name, physical address, and telephone number of the person who possesses the books a		ords of the organ	nization: 🕨		
	Safe & Sound: Baltimore's Campaign - (410) 625-797	б				
	2 East Read Street, Baltimore, MD 21202					
				Form	990 (20091

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B)	(C)						(D)	(E)	(F)		
Name and Title	Average	/ (Posi			LA.	Reportable	Reportable	Estimated		
	hours per week	Individual trustee or director	Institutional frustee	Officer		Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations		
Andrew D. Freeman, Esq. Director		х						0.	0.	0.		
Diana Morris		^				\vdash		0.	0.			
Director		Х					İ	0.	0.	0.		
Larry E. Walton		-	_									
Director		Х						0.	0.	0.		
Rev. Dr. Alvin C. Hathaw							_					
Director		X						0.	0.	0.		
Thomas E. Wilcox												
Director		X					_	0.	0.	0.		
Tim Duke										•		
Director		X	ļ		ļ	<u> </u>		0.	0.	0.		
Janice Wilcox		x						0.	0.	0.		
Director Douglas W. Nelson		^		┢	\vdash	 -	_	· · · · · · · · · · · · · · · · · · ·	0.	0.		
Director		Х						0.	0.	0.		
Hathaway Ferebee		1		├								
Executive Director	50.00			X		İ		137,361.	0.	0.		
			-									
		_										
										<u> </u>		
				<u>L</u>								

	Date and Dounal Bateti	ioro o campargii ror	
990 (2009)	our Children, Inc.		52-2147148 Page 8

	Section A. Officers, Directors, Tru	stees, Key Er	nplo	yee	s, a	nd h	ligh	<u>est</u>	Compensated Employ	ees (continued)				
	` (A)	(B) (C)							(D)	(E)		(F)		
	Name and title	Average hours	/		Pos			L A	Reportable	Reportable		Estimat amount		
		per week		ional frustæ	all t		nsated		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	other compensa from the organizati and relate		
			2	드	Б	×	Ξb	π.		-	-			
				İ										
										-,,				
							_			···	_			
											\neg			
											-			
				-	_						\dashv			
				-			<u> </u>	 !						
15	Total		<u> </u>			<u> </u>	<u> </u>		137,361.		0.		0.	
2	Total number of individuals (including but n	ot limited to th	ose	liste	ed al	bov		no re						
	compensation from the organization									· · · · · ·		l V	1	
3	Did the organization list any former officer,	director or tru	stee	. ke	v en	olar	vee.	or h	nighest compensated en	nolovee on	Г	Yes	No	
	line 1a? If "Yes," complete Schedule J for s		0.00	, 110	,	,,,,,	,	J. ,	ngnoot oon,penoixoo o			3	X	
4	For any individual listed on line 1a, is the su	•								the organization	ŀ		х	
5	and related organizations greater than \$150 Did any person listed on line 1a receive or a									ces rendered to	ŀ	4	<u> </u>	
	the organization? If "Yes," complete Sched	· ·										5	X	
	tion B. Independent Contractors								had reachined make them	\$100,000 of comm		tion from		
1	Complete this table for your five highest cothe organization. NONE	mpensateo ind	зере	ende	ento	onti	racio	ors t	nat received more than	a rou,oud or comp	ensa	ILIOH HOM		
	(A)								(B)			(C)		
	Name and business	address						\dashv	Description of s	ervices		ompensation		
								-						
				_			_	-			_	_	_	
		<u></u>												
				•								· · · · · · · · · · · · · · · · · · ·		
2	Total number of independent contractors (ot li	mıte	d to		_	stec	d above) who received m	ore than				
	\$100,000 in compensation from the organi	zation >					<u>0</u>				 I	Form 990	(2009)	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	not required to comple (B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		<u> </u>	gonoralon	
	organizations in the U.S. See Part IV. line 21	559,604.	559,604.		
2	Grants and other assistance to individuals in			*	
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				•
4	Benefits paid to or for members			**************************************	
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	591,746.	508,901.	82,845.	
8	Pension plan contributions (include section 401(k)		,		
-	and section 403(b) employer contributions)	22,542.	20,063.	2,479.	
9	Other employee benefits	87,726.	78,076.	2,479. 9,650.	
0	Payroll taxes	44,064.	39,217.	4,847.	
1	Fees for services (non-employees):	,			
а	Management				
b	Legal				
	Accounting	94,220.	94,220.		
٦	_, _, _ ¯	71/2201	71,2200		
đ	D -4				
e	·				
f	Investment management fees	611,750.	605,846.	5,904.	·
9		011,730.	0037040.	3/304.	·
12	Advertising and promotion	46,890.	46,890.		
13	Office expenses	488.	488.		
14	Information technology	400.	400.		
15	Royalties	82,010.	41,005.	41,005.	
16	Occupancy	10,346.	10,346.	41,005.	
17	Travel	10,340.	10,340.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	34,816.	34,816.	-	- -
19	Conferences, conventions, and meetings	34,010.	34,010.		
20	Interest				
21	Payments to affiliates	2 014	2,914.		
22	Depreciation, depletion, and amortization	2,914. 2,206.	2,206.		
23	Insurance	2,200.	2,200.		
24	Other expenses I temize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)			-	
а	Other Empered	37,060.	26,683.	10,377.	
b	Communications and Mark	13,565.	13,565.	•	
c	Other labor and wouth a	13,104.	13,104.		
d	Tondonahin and Chaff Mm	3,000.	3,000.		
e					
f	All other expenses				·
25	Total functional expenses. Add lines 1 through 24f	2,258,051.	2,100,944.	157,107.	0
<u>25</u> 26	Joint costs. Check here	_,,	_,,_,		
20	SOP 98-2 Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	reported in contrin (a) Joint costs nour a combined				

Pa	rt X	Balance Sheet					
		•			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			692,156.	1	1,339,626.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			526,497.	3	39,200.
	4	Accounts receivable, net			4		
	5	Receivables from current and former officers, di	rectors	, trustees, key			
		employees, and highest compensated employe	es. Co	mplete Part II			
	1	of Schedule L				5	
	6	Receivables from other disqualified persons (as	define	d under section			
		4958(f)(1)) and persons described in section 49	58(c)(3	(B). Complete			
ž		Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use	ļ	<u> </u>	8	<u> </u>	
Ĭ	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	52,120.			
	Ь,	Less: accumulated depreciation	10b	52,120. 42,056.	19,183.	10c	10,064.
	11	Investments - publicly traded securities		· · · · · · · · · · · · · · · · · · ·		11	
	12	investments - other securities. See Part IV, line		12			
	13	Investments - program-related. See Part IV, line			13		
	14	Intangible assets	·	14			
	15	Other assets. See Part IV, line 11	2,997.	15	251.		
	16	Total assets. Add lines 1 through 15 (must equ	1,240,833.	16	1,389,141.		
_	17	Accounts payable and accrued expenses	162,849.	17	41,075.		
	18	Grants payable		102,0151	18	12,0,00	
	19	Deferred revenue		}		19	
	20			Ì		20	
	1	Tax-exempt bond liabilities	David IV	of Cobodulo D		21	
	21	Escrow or custodial account liability. Complete			THE THE THE THE THE TENT		
	22	Payables to current and former officers, directo					
Liabilities		highest compensated employees, and disqualif	ieo per	sons. Complete Part II		00	
	00	of Schedule L				22	
	23	Secured mortgages and notes payable to unrel		T T		23	
	24	Unsecured notes and loans payable to unrelate		parties		24	
	25	Other liabilities. Complete Part X of Schedule D			162,849.	25	41,075.
_	26	Total liabilities. Add lines 17 through 25		V	102,049.	26	41,013.
		Organizations that follow SFAS 117, check h	ere 💌	and complete			
Net Assets or Fund Balances	1	lines 27 through 29, and lines 33 and 34.			364,304.		<545.
<u>a</u>	27	Unrestricted net assets		}		27	1,348,611.
Ď	28	Temporarily restricted net assets			713,680.	28	1,340,011.
Š	29	Permanently restricted net assets	.		29		
Ţ		Organizations that do not follow SFAS 117, or	heck I	nere 🕨 📖 and			
ō		complete lines 30 through 34.					
že	30	Capital stock or trust principal, or current funds				30	
Ź	31	Paid-in or capital surplus, or land, building, or e		l l		31	
ě	32	Retained earnings, endowment, accumulated in	ncome,	or other funds	1 077 004	32	1 240 066
_	33	Total net assets or fund balances			1,077,984.	33	1,348,066.
	34	Total liabilities and net assets/fund balances			1,240,833.	34	1,389,141.

Form **990** (2009)

	000 (2000)			90
Pa	rt XI Financial Statements and Reporting	_		
	•		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		_X
b	Were the organization's financial statements audited by an independent accountant?	2b	_X_	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	2c	X	ļ.,
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			
	consolidated basis, separate basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
	Act and OMB Circular A-133?	3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	Зь_	Х	

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047 Open to Public

Name of the organization

Safe and Sound: Baltimore's Campaign for our Children, Inc.

Inspection Employer identification number

		our Chi	ldren, Inc.			-	-		52	-2147	148
Part I	Reason		ty Status (All organiz	zations mu	st complet	e this par	t.) See inst	tructions.	· -		.
The organ	ization is not a	private foundation t	pecause it is: (For lines	1 through	11, check	only one b	ox.)				
1 🔲	A church, cor	nvention of churches	s, or association of chur	ches desc	ribed in se	ction 170	(b)(1)(A)(i)	١.			
2 🗌	A school des	cribed in section 17	0(b)(1)(A)(ii). (Attach Sc	hedule E.)							
з 🔲	A hospital or	a cooperative hospit	al service organization	described	ın section	170(b)(1)	(A)(iii).				
4	A medical res	search organization o	perated in conjunction	with a hos	pital desci	ıbed in se	ction 170	(b)(1)(A)(ii	i). Enter th	ne hospital	's name,
	city, and stat		-								
5 📖	An organizati	on operated for the I	benefit of a college or u	niversity o	wned or op	erated by	a governi	mental uni	t describe	d in	
	section 170	(b)(1)(A)(iv). (Comple	ete Part II.)								
6	A federal, sta	te, or local governme	ent or governmental uni	t describe	d ın sectio	n 170(b)(1	I)(A)(v).				
7 X	-	•	eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general p	ublic desc	ribed in
_		b)(1)(A)(vi). (Complet									
8 -	-		ection 170(b)(1)(A)(vi).	•	·-	_			_		
9	_		eives: (1) more than 33								
			nctions - subject to certa								
			exable income (less sec	tion 511 ta	ix) irom bu	sinesses a	acquirea b	y the orga	inization a	ner June 3	0, 1975.
10		509(a)(2). (Complete	reart iii.) perated exclusively to te	et for publ	ic cafety 9	See sectio	n 500(a)(1\			
11 🗀	•	• •	perated exclusively to te perated exclusively for the	•	-			-	v out the r	nurnoses o	f one or
			itions described in secti								
	-		organization and compl				,, , , , , , , , , , , , , , , , , , , ,		-/(-/		
	a Type I	· · · · · · · · · · · · · · · · · · ·	¬ '		e III - Fund		tegrated		d 🗀	Type III - C	Other
e 🗀	By checking	this box, I certify tha	t the organization is not	controlled	d directly o	r indirectly	by one o	r more disc	qualified p	ersons oth	er than
	foundation m	anagers and other t	han one or more publicl	y supporte	ed organiza	tions des	cribed in s	ection 509	9(a)(1) or s	ection 509	(a)(2).
f	If the organiz	ation received a writ	ten determination from	the IRS th	at it is a Ty	pe I, Type	II, or Type	e III			
		rganization, check th				-					
g			rganization accepted a								
			rectly controls, either a	lone or tog	ether with	persons o	described	ın (ıı) and (III) below,		Yes No
	-		upported organization?							11g(i)	
		•	described in (i) above?		. 0					11g(ii)	
L.			person described in (i)							11g(iii)	
h	Provide the t	ollowing intormation	about the supported or	ganization	(S).						
(I) No.	-4	(II) FIN	(iil) Type of	(iv) Is the	organization	(v) Did vo	u notify the	(vi) Is	the	(v:11) 0	
	of supported anization	(ii) EIN	organization		sted in your			organizátic	on in col	(VII) AII Sup	nount of
orga	J11124(1011		(described on lines 1-9 above or IRC section		document?		r support?	(i) organiz U S	2	Зар	port
			(see instructions))	Yes	No	Yes	No	Yes	No		
				<u> </u>							
							1				
				-			 -				
	•										
	 -			_							<u> </u>
					ļ	<u> </u>					
Total											

932021 02-08-10

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for

52-2147148 Page 2 Schedule A (Form 990 or 990-EZ) 2009 Our Children, Inc. Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support (e) 2009 (a) 2005 Calendar year (or fiscal year beginning in) (b) 2006 (c) 2007 (d) 2008 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 1,534,853 3,302,273 2,385,043 2,604,404 2,525,687 12,352,260. 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 1,534,853. Total. Add lines 1 through 3 3,302,273. 2,385,043. 2,604,404 2,525,687 12,352,260. The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4 12,352,260. Section B. Total Support

Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	1,534,853.	3,302,273.	2,385,043.	2,604,404.	2,525,687.	12,352,260
8	Gross income from interest,						
	dividends, payments received on			Ì			
	securities loans, rents, royalties						
	and income from similar sources	9,949.	16,553.	21,659.	22,290.	2,446.	72,897
9	Net income from unrelated business						
	activities, whether or not the				i		
	business is regularly carried on	ĺ					
10	Other income. Do not include gain						·
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	· · · · · · · · · · · · · · · · · · ·						12,425,157
12	Gross receipts from related activities.	etc. (see instructi	ons)			12	-

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

36	ction 6. Computation of Fublic Support Fercentage		
14	Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	99.41 %
15	Public support percentage from 2008 Schedule A, Part II, line 14	15	99.36 %

16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2009

 $\triangleright X$

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(1) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ- ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						
Section B. Total Support						
Calendar year (or fiscal year beginning in)▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for	the organization'	's first, second, thii	rd, fourth, or fifth t	ax year as a section	on 501(c)(3) organız	ation,
check this box and stop here						▶ _
Section C. Computation of Publi	c Support Pe	ercentage			-, · ·, · · · · · · · · · · · · · ·	
15 Public support percentage for 2009 (li	ne 8, column (f) c	divided by line 13, o	column (f))		15	
16 Public support percentage from 2008	Schedule A, Par	t III, line 15			16	
Section D. Computation of Inves	tment Incom	<u>ne Percentage</u>				
17 Investment income percentage for 20	09 (line 10c, colu	mn (f) divided by lii	ne 13, column (f))		17	
18 Investment income percentage from 2	008 Schedule A,	, Part III, line 17			18	
19a 33 1/3% support tests - 2009. If the	organization did	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line 1	7 is not
more than 33 1/3%, check this box ar	d stop here. The	organization qual	fies as a publicly s	supported organiz	ation	▶□
b 33 1/3% support tests - 2008. If the	organization did i	not check a box or	n line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	and
line 18 is not more than 33 1/3%, che	ck this box and s	top here. The orga	ınızatıon qualifies a	as a publicly supp	orted organization	▶∟

Schedule D (Form 990)

Department of the Treasury

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Internal Revenue Service Name of the organization

Safe and Sound: Baltimore's Campaign for our Children.

Employer identification number 52-2147148

Pa	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		•
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor adv	sed funds
	are the organization's property, subject to the organization's	=	Yes No
6	Did the organization inform all grantees, donors, and donor a	~	e used only
	for charitable purposes and not for the benefit of the donor of	• •	•
	impermissible private benefit?		Yes No
Pa	Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990.	
1	Purpose(s) of conservation easements held by the organization	· · · · · · · · · · · · · · · · · · ·	
	Preservation of land for public use (e.g., recreation or p	· —···	istorically important land area
	Protection of natural habitat		rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	n of a conservation easement on the last
	day of the tax year.		
	,		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06	2d
3	Number of conservation easements modified, transferred, re		ne organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements	during the year ▶
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements durin	g the year ▶ \$
8	Does each conservation easement reported on line 2(d) abor-	ve satisfy the requirements of section 17	O(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expens	se statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describe	s the organization's accounting for
	conservation easements.		
Pa	rt Ⅲ」Organizations Maintaining Collections o	f Art, Historical Treasures, or (Other Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116, no	ot to report in its revenue statement and	balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of p	ublic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these	items.	
b	If the organization elected, as permitted under SFAS 116, to	report in its revenue statement and bala	ince sheet works of art, historical treasures,
	or other similar assets held for public exhibition, education, of	or research in furtherance of public service	ce, provide the following amounts relating to
	these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financ	ıal gaın, provide
	the following amounts required to be reported under SFAS 1	16 relating to these items:	<u>.</u>
а	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
b	Assets included in Form 990, Part X		▶ \$

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Schedule D (Form 990) 2009

Schedule D (Form 990) 2009

e Other

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c))

Schedule D (Form 990) 2009 Our Childr Part VII Investments - Other Securities.	en, Inc.			2147148 Page 3
	See Form 990, Part X, I	ne 12.	4 3 84 45 - 4 -6	
(a) Description of security or category (including name of security)	(b) Book value	_	(c) Method of valuat ost or end-of-year mark	
	<u> </u>		ost or end-of-year mark	et value
Financial derivatives				_
Closely-held equity interests				
Other	· - · · · · · · · · · · · · · · · · · · ·			
				·
	•			
Total. (Col (b) must equal Form 990, Part X, col (B) line 12)			······································	······································
Part VIII Investments - Program Related.		line 13		
		illie 13	(c) Method of valuat	lon:
(a) Description of investment type	(b) Book value		ost or end-of-year mark	
		<u> </u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
				· · · · · · · · · · · · · · · · · · ·
		-		
	 			
	· 			
				
				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13) ▶				
Part IX Other Assets. See Form 990, Part X, III				(h) Dook volue
	a) Description	··········		(b) Book value
				
				
		····		
	<u>.</u> .			
	,			
Total. (Column (b) must equal Form 990, Part X, col (B) I			<u> </u>	
Part X Other Liabilities. See Form 990, Part	X, line 25.	-	· · · · · · · · · · · · · · · · · · ·	
1. (a) Description of liability		(b) Amount	_	
Federal income taxes			_	
			7 ,	
			7	`
Total. (Column (b) must equal Form 990, Part X, col (B) I	ine 25)			

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

932053 02-01-10

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service

Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

2009 No 1545-0047

2009 Open to Public Inspection

Employer identification number

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Campaign for

Safe and Sound: Baltimore's

ջ To support the Baltimore 52-2147148 Peer-to-Peer Initiative, to support the ACCESS after-school program. (h) Purpose of grant Couth Apprenticeship or assistance X Yes recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ame and address of organization if applicable cash grant or government assistance or government cash assistance or government cash assistance or government cash assistance or government cash assistance or government cash assistance or government cash assistance cash as cash as cash as cash as cash as cash as cash as cash as cash as cash as cash as cash as cash as ca to support the Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any Program Green (BYAP-Green). 1 Does the organization maintain records to substantiate the amount of the grants or assistance, and the selection ٥. ٥. ö Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 000 195,492 329,913, 30 501(c)(3) 501(c)(3) 501(c)(3) Inc. 23-7180620 25-1903112 20-5882891 General Information on Grants and Assistance our Children, criteria used to award the grants or assistance? The Baltimore Community Foundation 1 (a) Name and address of organization 2 East Read Street, 9th Floor Safe Healing Foundation, Inc. 2801 St. Lo Drive, Suite 110 1130 N. Caroline Street The BDJ-Stem Academy Baltimore, MD 21213 Baltimore, MD 21213 Baltimore, MD 21202 Parti Partil

Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2009

52-2147148

Schedule I (Form 990) 2009 Our Children, Inc.

| Part iii | Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Complete this part to provide the	de the informatio	n required in Part I,	line 2, and any other	information required in Part I, line 2, and any other additional information.	
Schedule I, Part I, Line 2: Safe and		monitors	the use of	Sound monitors the use of grant funds	
by reviewing financial reports and correspondence from the grantee,	corresp	ondence fr	om the gra	ntee, audit	
reports, site visits, and other information.	formatio	n.			

Schedule I (Form 990) 2009

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

Safe and Sound: Baltimore's Campaign for our Children, Inc.

Employer identification number 52-2147148

Form 990, Part VI, Section A, line 5: Effective in January 2009, The After-School Institute (TASI), which operated as a program of Safe and Sound, separated from Safe and Sound and became a separate 501(c)(3) not-for-profit organization. As a result, certain assets and liabilities have been transferred from Safe and Sound to TASI. The following assets and liabilities were contributed to TASI by Safe and Sound as of January 1, 2009.

Cash \$31,775

Accounts Receivable 97,828

Liabilities (7,899)

Net Assets \$121,704

Form 990, Part VI, Section A, line 8b: Safe and Sound does not have a committee with authority to act on behalf of the governing body.

Form 990, Part VI, Section B, line 11: A copy of the form 990 is provided for review and approval at the annual board meeting.

Form 990, Part VI, Section B, Line 12c: The board members sign the conflict of interest policy annually at the board meeting in June.

Form 990, Part VI, Section B, Line 15a: The compensation of the Executive
Director is reviewed and approved by the Board of Directors or the Board
Chairperson. The compensation is reviewed and approved using data taken
from Form 990 data of comparable organizations on www.Guidestar.org. There

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule O (Form 990) 2009

932211 02-03-10

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009 Open to Public Inspection

Name of the organization

Safe and Sound: Baltimore's Campaign for our Children, Inc.

Employer identification number 52-2147148

is documentation and recordkeeping with respect to the annual review and
decisions regarding the compensation arrangement.
Form 990, Part VI, Section C, Line 19: Safe and Sound makes its governing
documents, conflict of interest policy and financial statements available
upon request.
Form 990, Part VII Contact Addresses for Officers, Directors, Etc:
Hathaway Ferebee - 1025 W. 43rd Street, Baltimore, MD 21211
Andrew D. Freeman, Esq 120 E. Baltimore Street, Suite 1700
Baltimore, MD 21202
Diana Morris - 201 N. Charles Street, Suite 1300, Baltimore, MD 21201
Larry E. Walton - 100 S. Charles Street, 5th Floor , Baltimore, MD 21203
Rev. Dr. Alvin C. Hathaway - 1219 Druid Hill Ave, Baltimore, MD 21217
Thomas E. Wilcox - 2 East Read Street, 9th Floor, Baltimore, MD 21202
Tim Duke - 1410 Key Highway, Baltimore, MD 21230
Janice Wilcox - 8415 Bellona Lane, #508, Baltimore, MD 21204
Douglas W. Nelson - 701 St. Paul Street, Baltimore, MD 21202

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Schedule O (Form 990) 2009

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009 Open to Public Inspection

Name of the organization	our Children, Inc. Saltimore's Campaign for Employer identification number 52-2147148
Form 990, Part	XI, Line 2c:
The Organization	on has a Finance Committee which assumes the
responsibility	for oversight of the audit and selection of an
independent acc	countant.

Form 88	68 (Rev 4-2009)			Page 2
	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this bo			▶ X
	Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed	Form 8	3868.	
	u are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).			
Part				
Type o	Name of Exempt Organization Safe and Sound: Baltimore's Campaign for our Children, Inc.	•	oyer identi [.] 2–2147	fication number
File by the extended due date	Number, street, and room or suite no. If a P.O. box, see instructions.		RS use only	110
filing the return Se instruction				
X F	type of return to be filed (File a separate application for each return): form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720	== : :	rm 5227 rm 6069	Form 8870
STOP	Do not complete Part II if you were not already granted an automatic 3-month extension on a previous	sly file	d Form 886	i8.
Tele	Safe & Sound: Baltimore's Campaign books are in the care of \blacktriangleright 2 East Read Street - Baltimore, MD 2120 phone No. \blacktriangleright (410) 625-7976 FAX No. \blacktriangleright	2		
• If the	e organization does not have an office or place of business in the United States, check this box			▶ □
• If th	is <u>is fo</u> r a Group Return, enter the organization's four digit Group Exemption Number (GEN) If thi	s is for	the whole	group, check this
<u>box</u> ▶		memb	ers the exte	nsion is for.
	request an additional 3-month extension of time until November 15, 2010.			
5 F	for calendar year 2009 , or other tax year beginning, and ending			·
6 11	this tax year is for less than 12 months, check reason: Initial return Final return	L (Change in a	ccounting period
7 9	State in detail why you need the extension Fax preparer needs additional time for a complete and	acc	urate_	return.
8a II	this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			
	onrefundable credits. See instructions.	8a	\$	
_	this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated	- 00	_Ψ	
	ax payments made. Include any prior year overpayment allowed as a credit and any amount paid			
	previously with Form 8868.	8b	\$	
_	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit		- 	
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	N/A
	Signature and Verification			
Under p	enalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the , correct, and complete, and that I am authorized to prepare this form	best o	f my knowled	ge and belief,
Signatu	re ▶ Title ▶ CPA	Date		

923832 05-26-09

Signature **>**

Form 8868 (Rev. 4-2009)